



FIRST 5 CALIFORNIA INFORMAL CHILD CAREGIVER SUPPORT PROJECT FOCUS GROUP AND INTERVIEWS EXECUTIVE SUMMARY

The First 5 California Informal Child Caregiver Support Project is a landmark initiative. It is the first comprehensive investigation of the informal child caregiver population—a population that provides care for vast numbers of young children. Varying studies and reports indicate that between 30% and 50% of all children less than 5 years of age are cared for in these types of arrangements. While this sector has largely been unconnected to supports and resources, this First 5 project is serving to shed light on both the challenges and opportunities for children that exist in working with this informal caregiver population.

Between June 18 and October 4 2003, ETR Associates conducted 37 focus groups with nearly 300 diverse informal child caregivers or parents who use informal care. Caregivers participating in the project were unlicensed and cared for at least one child under age 6. Parents had at least one child under 6 who was cared for by an informal (unlicensed) child caregiver. The goals of the focus groups were to determine:

- what **support** informal child caregivers need and want to support children's improvement in school readiness and developmental domains,
- what **strategies** would be best for providing this support to informal child caregivers,
- what **materials** could be collected or developed for a supplemental materials packet to be used by informal child caregivers, and
- how these materials should be **distributed** to them.

Additionally, as an extension to the focus groups, ETR Associates conducted interviews with 11 informal child caregivers who care for children with special needs and 10 parents of children with special needs who use informal care. The primary goals of the interviews were to determine the support needed by informal child caregivers who care for young children with special needs, and to determine if or how these vary from the needs of informal child caregivers in general.

Please refer to the attachment for more detailed information about the study design.

Findings

The findings below **represent responses from 50% or more** of the focus groups.

Concerns and Challenges

The participants in both focus group phases were overwhelmingly in agreement about their top concerns and challenges. Those most often mentioned were related to:

- nutrition, especially due to children not eating or being picky eaters,
- inappropriate behavior,
- difficulty sharing, and



- differences in parents' expectations and rules for their children (i.e., children have less structure and different rules at home and often misbehave with parents, and this behavior often carries over into the childcare setting).

Challenges mentioned in the special needs interviews included those related to the special needs children's:

- physical difficulties, including difficulty moving or sitting, medical problems or persistent illness, needs for special equipment, and needs for special care to keep healthy, and
- behavior, including poor attention spans, inability to sit for even short periods of time, hyperactivity, tantrums, easily frustrated, or not recognizing dangerous situations.

Needed Materials

Almost all groups of focus group participants expressed the need for:

- books, particularly board books, educational books (especially alphabet books), and bilingual books (liked by English-speaking as well as Spanish-speaking caregivers),
- educational toys (e.g., puzzles and blocks), and
- arts and craft supplies like paper, paint, crayons, and play dough.

Participants in the materials review phase of the focus groups reviewed several toys and other materials for activities. The favored toys in the review materials were **puppets**, a **'soft shapes' book** (a thick, foam book with removable puzzle-type pieces), **and alphabet and shape dough cutters**, which were presented along with a play dough recipe.

Participants in the special needs interviews also requested toys, especially toys that help with a child's unique physical or sensory need. These toys would be stimulating and colorful with sound or lights. Some may even use words and help with speech.

Information

In the focus groups all participants were asked about the types of information they would find most valuable. Most often requested was:

- information about children's development, particularly about what is 'normal' at particular ages in terms of nutrition and physical development,
- training in first aide/CPR,
- information on specific medical needs of children (especially popular among caregivers with children with special needs),
- ideas of activities to do with children,
- ideas for 'positive' discipline,
- ideas on how to improve communication with children's parents,
- in special needs interviews, information related to special needs, either in general or about the specific need with which they were dealing (e.g., information on



what are realistic developmental expectations for children with developmental disabilities, information on adaptive communication, ideas for activities to do with children with autism, information on how to address medical needs).

Additionally, in interviews completed during recruitment, 37% of the caregivers expressed an interest in **becoming licensed**; only about one-third of them had ever attended a licensing orientation. In the focus groups, however, few participants discussed the need for licensing information or help as a priority.

Participants in the materials review phase reviewed several formats for presenting information and ideas. The caregivers liked the idea of:

- having information relevant to different ages on a single sheet that could be posted up so that it is always visible,
- presenting the 'big ideas' or most important information for a particular age,
- using many colorful, illustrative pictures or photos, and
- using simple language and few words in a large font.

A popular format for presenting ideas was through **activity cards**. The cards reviewed illustrated an activity appropriate for a particular age child on one side of the card and described the activity on the other. The cards were all bound together by a metal ring. What caregivers liked best about the cards were that they gave some developmental guidelines, that the picture was illustrative and made the cards useful to caregivers with low literacy, and that the ring kept all the cards together.

Caregivers were open to receiving the requested information and ideas through a variety of methods. They liked the idea of:

- training sessions,
- videotapes,
- booklets or newsletters,
- toll-free numbers,
- informational television or radio programs (although language was a concern), and
- meetings with other caregivers.

Resources

A very popular resource request among the focus group caregivers was for a way to get much needed **time off** or emergency back up. **Transportation** was another need mentioned in both focus groups and special needs interviews. What was most appealing to caregivers was having some sort of van service (like dial-a-ride) with car seats set up specifically for childcare caregivers with car seats.



Participants were asked about needs for community resources. They asked for:

- more or better parks or playgrounds,
- community resource centers,
- a special day of activities for them and the children in one of these community locations,
- a list of community services and resources that are available in their communities with descriptions or recommendations, and
- more or better libraries.

Participants in special needs interviews discussed wanting special equipment or programs at these locations for special needs children.

Barriers

When asked to discuss the barriers they faced in obtaining the desired materials or services, caregivers often mentioned:

- money/cost (caregivers mentioned they are paid little or nothing for their work and often are not reimbursed for materials and food),
- lack of knowledge of what to get or where to go and unavailable resources,
- language (many caregivers spoke little or no English), and
- transportation (many caregivers do not drive, and public transportation is not always available or reliable). Resources and services that are not home-based (including training sessions) need to provide transportation or be within walking distance.

Summary

Much was learned in the process of conducting these groups:

- It is difficult but not impossible to locate informal childcare caregivers.
- Using local field coordinators and matching facilitator and participant ethnicities kept participation rates high and seemed to put participants at ease to open up and provide candid responses.
- The more isolated the caregivers are, the more support they need. Those caregivers most in need of support are those who live in rural areas, areas with fewer resources, or recent or older immigrants. One of the most overwhelming needs for caregivers was the need to be linked to other caregivers for support.
- There was much commonality across caregivers in challenges and needs. Many of the needs are somewhat easy to address like needs for materials, information, and training. Others are more difficult, such as the need to set up networks or support systems for caregivers. Still others would take collaboration with outside entities like creating more parks or improving community resources.



Finally, caregivers often expressed interest in obtaining training and informational materials, but made it clear that these trainings and materials would need to be relevant to them. Local agencies may want to extend the work here by meeting with local caregivers to flesh out some of these specifics and create programs that best meet the needs of their particular populations.

Next Steps

- A Resource Guide is under development on effective and promising best practices for reaching, educating, and supporting informal child caregivers.
- In March 2004, ETR Associates will be delivering three half-day trainings to County Commissions, School Readiness Programs, and other partners in four areas throughout California on conducting focus groups with informal caregivers and the use of the Resource Guide including best practices in this topic area.
- A sample Supplemental Materials Packet based on focus group input soon will be completed.
- Additional focus groups will be conducted in late winter to determine the usefulness of the Kit for New Parents with informal caregivers.
- Staff will make recommendations to the State Commission at the July 2004 Commission meeting regarding several key components for the Second Phase of the project.



FIRST 5 CALIFORNIA INFORMAL CHILD CAREGIVER SUPPORT PROJECT FOCUS GROUP AND INTERVIEWS EXECUTIVE SUMMARY: ATTACHMENT

Focus Group Design

Site and Participant Selection

Focus group sites were selected from within 25 counties that had funded School Readiness Initiative programs, and special needs participants resided within 9 counties. One of the primary goals in designing the site selection plans was to represent and draw conclusions on subgroups that represent the ethnic and language diversity of the informal child caregiver population as well as other desired characteristics. Subgroup variables of interest in this study were:

- Ethnicity (African American, Asian, Caucasian, Hispanic),
- Subsidy status (receiving a subsidy/not receiving a subsidy),
- Relationship to child (related/not related), and
- Location (urban/rural).

For each site individuals from the local community were recruited to serve as field coordinators based on nominations from Expert Group members, project consultants, and County First 5 Executive Directors. These individuals helped locate the caregivers and parents in the communities and, for focus groups, set up focus group logistics. All field coordinators received training and a corresponding Field Coordinator Binder from ETR on recruitment and, for focus group coordinators, focus group logistics. The Binder for the focus group coordinators also included a telephone survey, which field coordinators administered at the time of recruitment. Field coordinators received specific instructions about recruiting participants with specific characteristics identified for their site.

Participant Demographics

Overall there were 284 eligible participants in the focus groups (245 caregivers and 39 parents). Groups ranged in size from 2 to 16 participants with a median of about 7.5. Eighty-two percent of those who had initially consented to participate showed up to the groups. Demographic data showed that:

- Almost all participants were female.
- The average age of the caregivers was 40.
- About 50% of the participants were Hispanic, and over 25% were Asian.
- Thirty-five percent of the providers spoke primarily English only, 29% spoke primarily Spanish only (an additional 10% spoke Spanish and English), and 19% spoke an Asian language only (5% more spoke and Asian language and English).
- About 40% of the caregivers did not graduate from high school, but 40% reported having some college or a college degree.
- 64% of the participants were not in a subsidy program.



- Over 40% of the caregivers cared for a grandchild or used a grandparent as caregiver, and over 30% cared for a child or used a caregiver who was not a relative.
- 11% reported caring for (caregivers) a child with special needs or having (parents) a child with special needs who was in informal care.
- Less than 50% of the caregivers had had CPR training, with about 25% having had it in the past 2 years.
- On average, the caregivers work something close to a typical 5-day, 40-hour workweek.
- About 14% of the caregivers work after 7pm on at least one day, about 25% work weekends, and about 30% work nights and/or weekends.

The 21 special needs participants were similar to those participating in the focus groups. However, they were slightly older and worked for about one day less a week. The children discussed had a variety of special needs. Most common were:

- medical needs, including asthma,
- physical or sensory needs, and
- autism.

About 5 of the children discussed had multiple disabilities. About 60% of the children were receiving some sort of early intervention, including Early Start, occupational or physical therapy, or special classes. Eighty-three percent of the parents reported that their children spent some part of a day in a location other than with the informal child caregiver.

Design

Focus groups were conducted in 2 'phases.'

In Phase 1, caregivers discussed a) concerns and challenges related to the development of the children for whom they provided care, b) wants and needs as well as barriers to providing care, and c) methods for addressing wants and needs. Parents discussed similar topics as they pertained to their informal child caregiver.

In Phase 2, a new group of participants reviewed results from Phase 1 as well as potential materials for a Supplemental Materials Packet.

Protocols were developed for each set of focus groups and piloted with appropriate participants. Each focus group was conducted by two trained facilitators who were selected based on the ethnicity and language requirements of a particular group.

For the special needs interviews, two interview protocols were developed: one for use with caregivers and one for parents. The protocols included information on the project and asked questions about 1) the child's special need, 2) the schedule for providing care, 3) challenges faced, 4) needs within four categories (materials and equipment, knowledge and information, personal or professional resources and support, and community resources), and 5) knowledge about First 5 and CPR training. The caregiver protocol also included optional questions about education and training. Two ETR staff members interviewed most of the participants.



Additional Results

Subgroup Results

One of the goals of this project was to be able to reach some conclusions about different subpopulations participating in the focus groups. For the most part, comments were very similar across groups of caregivers. However, there were some variations:

- **Subsidy Status.** No real variation in responses related to participation in a subsidy program were observed.
- **Location.** For the most part, the needs were similar among caregivers in rural and urban areas, but the need was greater in more rural areas because of the fact that so few resources are available to them in their communities.
- **Local Resources.** Differences were noted among groups who were accessing services (e.g., training) through the local Resource & Referral agency as opposed to those who were not. These groups appeared to be more educated about childcare and development issues, to have more available resources, and to be less isolated than those participants who were not accessing such services.
- **Culture.** Immigrant populations (especially the Asian immigrants) appeared to have the greatest need for support. They face major language barriers as well as transportation issues and a lack of trust of public agencies or unwillingness to access the agencies for help.